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		Application Number	09/848,394
		Filing Date	May 3, 2001
		First Named Inventor	Sandeep Kishan Singhal
		Group Art Unit Number	2157
		Examiner Name	Moustafa M. Meky
Total Number of Pages in This Submission	5	Attorney Docket Number	20423-10013

ENCLOSURES (check all that apply)	
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input checked="" type="checkbox"/> Check Enclosed <input checked="" type="checkbox"/> Return Receipt Postcard <input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Assignment & Recordation Cover Sheet <input type="checkbox"/> Declaration <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Information Disclosure Statement & PTO/SB/08A <input type="checkbox"/> Copies of IDS Cited References <input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> Request for Correction of Recorded Assignment <input type="checkbox"/> Amendment/Response: [ ] Page(s) <input type="checkbox"/> After Final <input type="checkbox"/> Status Request <input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/> Issue Fee Transmittal <input type="checkbox"/> Letter to Chief Draftsperson <input type="checkbox"/> Formal Drawing(s): <input type="checkbox"/> [ ] Sheet(s) of Figure(s) [ ] <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Submission of Balance of Issue Fee <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
REMARKS:	

SIGNATURE OF ATTORNEY OR AGENT	
Signature:	
Attorney/Reg. No.:	Neil F. Maloney, Reg. 42,833
Dated:	May 10, 2005

CERTIFICATE OF MAILING	
I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.	
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20423/10013/DOCS/1526024.1

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MAY 13 2005

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# EE TRANSMITTAL

for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

**TOTAL AMOUNT OF PAYMENT** (\$ 30.00) Attorney Docket No. 20423-10013

**METHOD OF PAYMENT** (check all that apply)

- Check  Credit Card  Money Order  Other  None  
 Deposit Account

Deposit Account Number

19-2555

**Deposit Account Name**

Faywick 8 West ILR

The Commissioner is authorized to: (check all that apply)

- The Commissioner is authorized to: (check all that apply)

  - Charge fee(s) indicated below  Credit any overpayments
  - Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application
  - Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

## **FFF CALCULATION**

## 1. BASIC FILING FEE

**SUBTOTAL (1) (\$)**

**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE**

	Extra Claims	Fee from below	Fee Paid
Total Claims	-20** =	X	
Independent Claims	-3** =	X	
Multiple Dependent			

Large Entity

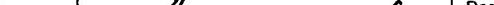
<u>Large Entity</u>	<u>Small Entity</u>		<u>Fee Description</u>	
<u>Fee</u>	<u>Fee</u>			
<u>Code</u>	<u>(\\$)</u>	<u>Code</u>	<u>(\\$)</u>	
1202	50	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	360	2203	180	Multiple dependent claim, if not paid
1204	200	2204	100	**Reissue independent claims over original patent
1205	50	2205	25	**Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) (\$)**

For number previously paid, if greater: For Reissues, see above

**SUBMITTED BY**

**Complete (if applicable)**

Name (Print/Type)	Neil F. Maloney	Registration No. (Attorney/Agent)	42,833	Telephone (650) 335-7127
Signature			Date	May 10, 2005

20423/10013/DOCS/1526021.1

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PATENT

IN THE UNITED STATES

PATENT AND TRADEMARK OFFICE

APPLICANT: Sandeep K. Singhal, Barry E. Levinson, Darren M. Sanders

APPLICATION NO.: 09/848,394

FILING DATE: May 3, 2001

TITLE: TECHNIQUE FOR ENABLING REMOTE DATA ACCESS AND  
MANIPULATION FROM A PERVASIVE DEVICE

EXAMINER: Moustafa M. Meky

GROUP ART UNIT: 2157

ATTY. DKT. NO.: 20423-10013

CERTIFICATE OF MAILING

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Dated: May 10, 2005

By:   
Nubia Morad

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05/16/2005 BABRAHA2 00000010 09848394

01 FC:1501

1400.00 OP

02 FC:1504

300.00 OP

SUBMISSION OF BALANCE OF ISSUE FEE

SIR:

The issue fee payment (indicated on the Notice of Allowance) was submitted on February 18, 2005 in the above entitled case. However, due to an increase in patent fees that became effective December 18, 2004, the paid amount was incorrect by \$30.00.

Therefore, the Applicants are submitting herewith the balance due as follows:

APPLICATION TYPE	ISSUE FEE REQ.( <i>large entity</i> ) <i>(including Publication fee)</i>	ISSUE FEE PAID	BALANCE DUE
Utility	\$1,700	\$1670	\$30.00

Adjustment date 05/16/2005 BABRAHA2  
02/22/2005 MBIZINE2 00000025 09848394  
01 FC:1501 -1400.00 OP  
02 FC:1506 -270.00 OP

1

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**PATENT**

The Applicants kindly invite the Examiner to contact the undersigned attorney by telephone, facsimile, or email for quickest resolution, if there are any remaining issues.

Respectfully submitted,  
SANDEEP K. SINGHAL

Dated: May 10, 2005

By:

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20423/10013/DOCS/1526033.1